

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Oct 16 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT AMENDED 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000034168
1. Corporation Name
DOGWATER CAFE III, INC.

Principal Place of Business Mailing Address

Amended

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21 2506 Countryside Boulevard
Suite, Apt. #, etc
22
City & State
23 Clearwater, FL
Zip Country
24 34623 25

2a. Mailing Address
26 116 Phillips Way
Suite, Apt. #, etc.
27
City & State
28 Palm Harbor, FL
Zip Country
29 34683 30

3. Date Incorporated or Qualified
5/11/1993
4. FEI Number
59-3216861 Applied For Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30 Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

B1 Name John Drozdyk
B2 Street Address (P.O. Box Number is Not Acceptable) 116 Phillips Way
B3
B4 City Palm Harbor, FL B5 Zip Code 34683

11. Pursuant to the provisions of Sections 607.0002 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: John Drozdyk (Signature) DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	D, P, S, T <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	John Drozdyk
13 STREET ADDRESS	116 Phillips Way
14 CITY- ST- ZIP	Palm Harbor, FL 34683
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY- ST- ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY- ST- ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY- ST- ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	600002666336
53 STREET ADDRESS	-10/19/98-01006-049
54 CITY- ST- ZIP	***183.75
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY- ST- ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on any attachment to this address.

SIGNATURE: _____
SIGNATURE AND TYPE OF REGISTERED OFFICE OR DIRECTOR

10-8-98

CR2E034 (10/97)